

PART I LOBBYIST

Rev. 12/2019

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY /

HONOLULU
ETHICS COMMISSION
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2020 REGISTRATION²⁰

Lobbyist Registration (Type or Print Clearly)

NAME (Last) (First) (Middle)		The state of the s				
Delaunay, Christopher Michael						
LOBBYIST FIRM/EMPLOYER (if applicable	TELEPHONE					
Pacific Resource Partnership	808-528-5557					
MAILING ADDRESS (No. and Street or	FAX					
1100 Alakea Street, 4th Floor						
		EMAIL cdelar	unay@prp-	hawaii.com		
(City) Honolulu	(State) Hawaii	(Zip Code)	813			
	0.004 (Mo.) No.					
PART II.A ORGANIZATION						
NAME OF ORGANIZATION YOU LOBE	TELEPHONE					
Pacific Resource Partnership	808-528-5557					
MAILING ADDRESS (No. and Street or	FAX					
1100 Alakea Street, 4th Floor		EMAIL cdelaunay@prp-hawaii.com				
(City) Honolulu	(State) Hawaii	(Zip Code) 96813				
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)						
Approximately 240 contractors & 5,000 carpenter union members						
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS						
Board of Directors and Executive Director						
PART II.B NO LONGER LOBBYING						
☐ I am no longer authorized to lobby on behalf of the organization in Part II.A DATE						
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NOTE: This is a public document.

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PART III DESCRIPTION	OF SUBJEC	CTS ON W	VHICH	YOU EXPECT TO LOBBY			
☑Business & Economic Development	□Community Services			□Customer Services			
□Culture & Arts	⊠Housing			☑Public Works, Infrastructure & Sustainability			
□Parks & Recreation	□Public Health, Safety & Welfare		Velfare	□Tourism			
□Transportation	⊠Zoning & Planning			□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept			
□Other (indicate below):							
		- 1000					
PART IV LOBBYIST CER	RTIFICATIO	N					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 1/3/2020 DATE		ie and	Subscribed and sworn to before me This3 _ day of				
PART V AUTHORIZATIO	ON TO LOBE		VIITHOE	RIZING OFFICER OR PERSON			
NAME Michael Formby							
NAME OF ORGANIZATION (if applicable)		TEL	ELEPHONE				
Pacific Resource Partnership			808-528-5557				
MAILING ADDRESS (No. and Street or P.O Box) 1100 Alakea Street, 4th Floor		FAX	808-528-0421				
TIOU Alakea Street, 4th Floor		EMA	EMAIL mformby@prp-hawaii.com				
(City) Honolulu	(State) (Zip		(Zip	Code) 96813			
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.							
1/3/2020				1/3/2020			
(Signature of Authorizing Officer or Person Represented)			(Date)				

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M. Rabago First Circuit

Doc. Description 2020 Registration

What Into Notary Signature

No. 06-762

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